Attorney's Docket No. 80398.P446

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of:)
Rafey, et al.) Examiner: V. Le
Application No.: 09/942,806) Art Unit: 2613
Filed: August 19, 2001	<i>)</i>))
For: Extracting a Depth Map from Known Camera and Model Tracking Data)))
Commissioner for Patents	,
P.O. Box 1450	
Alexandria, Virginia 22313-1450	

INFORMATION DISCLOSURE STATEMENT

Sir:

Enclosed is a copy of Information Disclosure Citation Form PTO-1449 or PTO/SB/08 together with copies of the documents cited on that form, except for copies not required to be submitted (e.g., copies of U.S. patents and U.S. published patent applications need not be enclosed). It is respectfully requested that the cited documents be considered and that the enclosed copy of Information Disclosure Citation Form PTO-1449 or PTO/SB/08 be initialed by the Examiner to indicate such consideration and a copy thereof returned to applicant(s).

Pursuant to 37 C.F.R. § 1.97, the submission of this Information

Disclosure Statement is not to be construed as a representation that a search

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope applies en Other Commissioner for Patents, P.O. Box
1450, Alexandria, Virginia 22313-1450 on
(Ďate of Déposit)
Cheri Clinkenbeard
(fyed or printed rame of person mailing cor/espondence)
(Signature of person mailing correspondence)

12/17/2004 JEALINAN 00000025 03942806

61 FC:1805

180.00 GP

has been made and is not to be construed as an admission that the information cited in this statement is material to patentability.

Pursuant to 37 C.F.R. § 1.97, this Information Disclosure Statement is being submitted under one of the following (as indicated by an "X" to the left of the appropriate paragraph):

	37 C.F.R. §1.97(b).
_X	37 C.F.R. §1.97(c). If so, then enclosed with this Information Disclosure Statement is one of the following:
	A statement pursuant to 37 C.F.R. §1.97(e) or
X	A check for \$180.00 for the fee under 37 C.F.R. § 1.17(p).
	37 C.F.R. §1.97(d). If so, then enclosed with this Information Disclosure Statement are the following:
	(1) A statement pursuant to 37 C.F.R. §1.97(e); and

(2) A check for \$180.00 for the fee under 37 C.F.R. §1.17(p) for submission of the Information Disclosure Statement.

If there are any additional charges, please charge Deposit Account No. 02-2666.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Dated: DEC. 9, 2004

Sheryl Sue Holloway Reg. No. 37,850

12400 Wilshire Blvd. Seventh Floor Los Angeles, CA 90025 (408) 720-8300

Substitute	for Form 1449				Complete if	Known
TPE	MIEOE	ΔΛΛ	TION DISCLOSU	RE	Application Number	09/942,806
O	Sin Or	VIVI\	TION DISCLOSE		Filing Date	8/29/01
ner 1 6 20	ITATIS N	EME	NT BY APPLICA	NT	First Named Inventor:	Rafey
neo .	<i>[</i> 2]	(use as	many sheets as necessary)		Art Unit	2613
En.	W. C.				Examiner Name	V. Le
Sheet Sheet	1		of	2	Attorney Docket Number	80398.P446
	1		110 00			
· <u> </u>			U.S. PAT	ENT DOCUMENTS		D O.I I i
Examiner Initials*	Cite No.		Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant
•					''	Passages or Relevant
		Num	per-Kind Code ² (If known)			Figures Appear
 		US-	6,080,063	6/27/00	Khosla	
		US-				
		US-				
 -		US-				
		US-				
	<u> </u>	US-				
•		US-				
		US-				
		US-				
		US-				
		US-				
		US-				
· 		US-				
		US-				

		FO	REIGN PATENT	DOCUMENTS		
Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ³ Number ⁴ Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T°

Examiner	Date Considered	
Signature		

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹Applicant's unique citation designation number (optional). ²See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴For Japanese patent documents, the indication of the year of reign of the Emperor must precede the serial number of the patent document. ⁵Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶Applicant is to place a check mark here if English language translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SENT FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Substitute fo	or Form 1	449/PTO		Comp	olete if Known		
		TION DISC		Application Number	09/942,806		
	1			Filing Date	8/29/01		
STAT	EME	NT BY APF	PLICANT	First Named Inventor:	Rafey		
DEC 1 6 200	(Mise as r	nany sheets as neces	ssary)	Art Unit	2613		
_	<i>¥</i>			Examiner Name	V. Le		
Chaet voor		of	2	Attorney Docket Number	80398.P446		
WIND.			NON PATENT LIT	ERATURE DOCUMENTS			
Examiner Initials*	Cite No ¹	Include name of item (book, r	nagazine, journal, se	AL LETTERS), title of the article rial, symposium, catalog, etc.), of isher, city and/or country where	late, page(s), volu	te), title of the ume-issue	T²
Examiner Signature					Date Considered		

^{*}Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English Translation is attached. This collection of information is required by 37 CFR 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SENT FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.



24,38

FEE TRANSMITTAL FOR FY 2005

(FY 2005 Begins 10/01/2004. Fee changes made on 11/22/04 and 12/08/04 are included.)

TOTAL AMOUNT OF PAYMENT (\$) 180.00

]				IDIAL AMOUNT OF PAYE	MENT (\$) 100.00	
Comple						
Applicat	tion No.		09/94	2,806		
Filing D			8/19/0			
First Na	med Inv	ventor	Rafey	·		
Examin			V. Le			
Art Unit		_	2613			
Attorne		t No		3.P446		
Attorne	, DOORE		00000	7.1 440	and the same of th	
	-	Applic	ant clain	ns small entity status. See 37	CFR 1.27.	
METHO	D OF I	PAYMFI	NT (che	ck all that apply)		
					der Other	None
		it Accou		Money On	Other	
	_ nehos			nt Number : <u>02-2666</u>		
	71 . D:			nt Name:		Donosit Assounts
<u> </u>	The Di			zed to do the following with res	spect to the above-identified	Deposit Account:
				ndicated below.		
	<u>X</u>			rpayments.		
	<u>X</u>			ditional fees during the pender		
	<u>X</u>			or future reply that requires a petit		
		incorpo	rating an	appropriate petition for extension	of time and all required fees she	ould be charged.
		Charge	e fee(s) i	ndicated below except for the	filing fee	
						·
FEE CA	ALCUL	ATION				
0,						
1A.	BASIC	FILING	FEE/S	EARCH FEE/EXAMINATION	<u>FEE</u>	
Large E	ntitv	Small I	Entity			
Fee	Fee	Fee	Fee			
Code	(\$)	Code	(\$)	Fee Description		Fee Paid
1011	300	2011	150	Utility application filing fee	7	
1111	500	2111	250	Utility search fee	1,000/500*	
			100		1,000/300	
1311	200	2311	100	Utility examination fee		
					~	
1012	200	2012	100	Design application filing fee		
1112	100	2112	50	Design search fee	≻ 430/215*	
1312	130	2312	65	Design examination fee	J	
_	=		-			_
1013	200	2013	100	Plant filing fee		
1113	300	2113	150	Plant search fee	├ 660/330*	_
1313	160	2313	80	Plant examination fee	J	

1004	300	2004	150	Reissue filing fee	\	
1114	500	2114	250	Reissue search fee	1,400/700*	
					1,4007700	
1314	600	2314	300	Reissue examination fee	J	
1005	200	2005	100	Provisional application filing	j fee	
						
					SUBTOTAL (1) \$_	0
					, , , , ,	
* List th	e filing,	search, a	and exan	nination fees separately, but pay	concurrently.	

				Extra Sheets Fee from Fee paid below
Fotal \$	Sheets		100	
				*(round up to integer)
	Entity	Small	<u>Entity</u>	
Fee	Fee	Fee	Fee	
Code	(\$)	Code	(\$)	Fee Description
1081	250	2081	125	Utility application size fee for each additional group of
				50 sheets beyond initial 100 sheets
4000	050	2022	405	(count spec & drawings except sequences & program listings)
1082	250	2082	125	Design application size fee for each additional group of
				50 sheets beyond initial 100 sheets (count spec & drawings except sequences & program listings)
1083	250	2083	125	Plant application size fee for each additional group of
1003	230	2003	123	50 sheets beyond initial 100 sheets
				(count spec & drawings except sequences & program listings)
1084	250	2084	125	Reissue application fee for each additional group of
				50 sheets beyond initial 100 sheets
				(count spec & drawings except sequences & program listings)
				SUBTOTAL (2) \$0
			-0 -00	HITH ITY AND DEICOHE
	TO 4 OI			IIIIIII II ANII REISSUE
2. <u>EX</u>	TRA CL	<u>AIM FEI</u>	-5 FUR	UTILITY AND REISSUE Fee from
2. <u>EX</u>	TRA CL	<u>AIM FEI</u>	ES FUR	Fee from
				Fee from <u>Extra Claims</u> <u>below</u> <u>Fee Paid</u>
				Fee from <u>Extra Claims</u> <u>below</u> <u>Fee Paid</u>
				Fee from <u>Extra Claims</u> <u>below</u> <u>Fee Paid</u>
Total		Claims .		Fee from below Fee Paid - 20** = X =
Total Indep Multir	Claims endent ole Depe	Claims endent		Fee from <u>Extra Claims</u> <u>below</u> <u>Fee Paid</u>
Total Indep Multip	Claims endent ble Depe	Claims endent previous	sly paid,	Fee from below Fee Paid - 20** =
Total Indep Multip	Claims endent ole Depe	Claims endent	sly paid,	Fee from below Fee Paid - 20** =
Total Indep Multip	Claims endent ble Depe	Claims endent previous	sly paid, Entity (\$)	Extra Claims - 20** =
Total Indep Multip **Or n Large	Claims endent ble Depe number (Entity	Claims endent previous Small	sly paid, Entity (\$)	Extra Claims Extra Claims - 20** =
Total Indep Multip **Or n Large	Claims endent ble Depe number (Entity (\$)	Claims endent previous Small Code 2202 2201	sly paid, Entity (\$) 25	Extra Claims
Total Indep Multip **Or n Large Code 1202	Claims endent ole Depe number (Entity (\$) 50	Claims endent previous Small Code 2202 2201 2203	(\$) (\$) 25 100 180	Extra Claims Fee from below Fee Paid - 20** =
Total Indep Multip **Or n Large Code 1202 1201 1203 1204	Claims endent ole Depe number (Entity (\$) 50 200	Claims endent previous Small Code 2202 2201 2203 2204	(\$) (\$) 25 100 180	Extra Claims Extra Claims Extra Claims Fee from below Fee Paid X = X = X = X = If greater; For Reissues, see below. Fee Fee Fee Fee Fee Fee Description Claims in excess of 20 Independent claims in excess of 3 Multiple dependent claim, if not paid **Reissue independent claims over original patent
Total Indep Multip **Or n Large Code 1202 1201 1203	Claims endent ole Depe number (Entity (\$) 50 200 360	Claims endent previous Small Code 2202 2201 2203	(\$) (\$) 25 100 180	Extra Claims Extra Claims Fee from below Fee Paid X X X X Extra Claims Fee Paid X Extra Claims Fee Paid X Extra Claims Fee Paid X Extra Claims X Extra Claims Fee Paid X Extra Claims Fee Paid
Total Indep Multip **Or n Large Code 1202 1201 1203 1204	Claims endent ble Depe number (Entity (\$) 50 200 360 200	Claims endent previous Small Code 2202 2201 2203 2204	(\$) (\$) 25 100 180	Extra Claims Extra Claims Extra Claims Fee from below Fee Paid X = X = X = X = If greater; For Reissues, see below. Fee Fee Fee Fee Fee Fee Description Claims in excess of 20 Independent claims in excess of 3 Multiple dependent claim, if not paid **Reissue independent claims over original patent

FEE CALCULATION (continued) 3. ADDITIONAL FEES **Large Entity** Small Entity Fee Fee Fee Fee Fee Paid Code Code (\$) Fee Description (\$) 1051 130 2051 65 Surcharge - late filing fee or oath 1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet 130 1053 130 1053 Non-English specification 2,520 For filing a request for ex parte reexamination 2,520 1812 1812 8.800 Request for inter parties reexamination 1813 8.800 1813 Requesting publication of SIR prior to Examiner action 1804 920* 1804 920* 1,840* 1805 1,840* Requesting publication of SIR after Examiner action 1805 1251 120 2251 60 Extension for reply within first month 1252 450 2252 225 Extension for reply within second month 1253 1.020 2253 510 Extension for reply within third month 1254 1.590 2254 795 Extension for reply within fourth month 1,080 Extension for reply within fifth month 1255 2,160 2255 250 **Notice of Appeal** 1401 500 2401 1402 500 2402 250 Filing a brief in support of an appeal 1403 1,000 2403 500 Request for oral hearing Petition to institute a public use proceeding 1451 1,510 1451 1,510 Petition to revive - unavoidable 250 1452 500 2452 Petition to revive - unintentional 1453 1,500 2453 750 Utility issue fee (or reissue) 1501 1,400 2501 700 Design issue fee 1502 800 2502 400 550 Plant issue fee 1503 1100 2503 1460 130 Petitions to the Commissioner (CFR 1.17(h) Group III) 1464 130 Petitions to the Commissioner (CFR 1.17(g) Group II) 1463 200 1460 200 Petitions to the Commissioner (CFR 1.17(f) Group I) 1462 400 1460 400 Processing fee under 37 CFR 1.17(q) 1807 50 1807 50 **Submission of Information Disclosure Stmt** 180.00 1806 180 1806 180 8021 40 8021 40 Recording each patent assignment per property (times number of properties) 395 1809 790 2809 For filing a submission after final rejection (see 37 CFR 1.129(a)) 65 Statutory Disclaimer 1814 130 2814 For each additional invention to be examined 1810 790 2810 395 (see 37 CFR 1.129(b)) 790 395 Request for Continued Examination (RCE) 1801 2801 1802 900 1802 900 Request for expedited examination of a design application 300 Publication fee for early, voluntary, or normal pub. 1504 300 1504 300 Publication fee for republication 1505 300 1505 Request for voluntary publication or republication 1803 130 1803 130 1808 130 1808 130 Processing fee under 37 CFR 1.17(i) (except provisionals) 1454 1,370 Acceptance of unintentionally delayed claim for priority _ 1454 1,370 Other fee (specify) Other fee (specify) SUBTOTAL (4) \$ 180.00 *Reduced by Basic Filing Fee Paid **SUBMITTED BY:** Typed or Printed Name: Sheryl Sue Holloway DEC. 7004 Date: Signature: 🕜

Send to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Reg. Number: <u>37,850</u>

Telephone Number: _408-720-8300